

Kentucky Office of Insurance LICENSING REQUEST FORM

The process to obtain Kentucky criminal background checks through the CourtNet Disposition System are as follows:

Requesting a criminal background check for the purpose of obtaining a License with the Kentucky Office of Insurance requires a **\$10.00 fee** (check or money order made payable to the KENTUCKY STATE TREASURER). Completely fill out this form and enclose a self-addressed postage paid envelope *or* your complete e-mail address. A copy of your criminal background check will be e-mailed to the Office of Insurance. The individual and KOI will receive a copy of the report. If you have any questions, please contact Customer Service, Pretrial Services, Records Division at (502) 573-1682 or (800) 928-6381.

Mail request to this address: **ADMINISTRATIVE OFFICE OF THE COURTS
PRETRIAL SERVICES, RECORDS DIVISION
100 MILLCREEK PARK
FRANKFORT KY 40601**

PLEASE **PRINT OR TYPE** THE INFORMATION CLEARLY

<u>Last Name</u>	<u>First Name</u>	<u>Middle Name</u>	<u>(Jr., Sr., etc.)</u>
<u>Social Security Number</u> - -	<u>Date of Birth</u> Mo. ____ Day ____ Year ____	<u>Alias/Maiden Name</u>	
<u>Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
<u>Complete e-mail Address :</u>			

I understand that failure to accurately provide the information requested may result in my prosecution under KRS 523.100

Signature of Licensee

Date

Kentucky Office of Insurance Agent Licensing Division 215 W. Main Street P.O. Box 517 Frankfort, KY 40602 (502) 564-6004	For Office Use Only
e-mail: <u>KOIAgentLicensingMail@ky.gov</u>	e-mail to: <u>KOIAgentLicensingMail@ky.gov</u>

FAILURE TO COMPLY WITH ALL PROCEDURES WILL RESULT IN THIS DOCUMENT BEING RETURNED UNPROCESSED